



**DEPARTMENT OF MENTAL HEALTH
MANAGEMENT OF THE SUBSTANCE ABUSE TRAFFIC
OFFENDERS PROGRAM**

**From The Office Of State Auditor
Claire McCaskill**

*The Division of Alcohol and Drug Abuse has
not ensured repeat offenders advance to higher
level treatment programs.*

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PERFORMANCE AUDIT



Office Of The
State Auditor Of Missouri
Claire McCaskill

October 2002

The following problems were discovered as a result of an audit conducted by our office of the Department of Mental Health, Management of the Substance Abuse Traffic Offenders Program (SATOP).

The SATOP program is a statewide system of comprehensive, accessible, community-based education and treatment options for individuals arrested in Missouri on alcohol and drug-related offenses. State law requires suspension of an offender's driver's license until he/she successfully completes an acceptable substance abuse traffic offender program. Depending on severity and frequency of offense, offenders can be ordered to different levels of treatment.

Questionable treatment level for repeat offenders

Some repeat offenders do not advance to higher level treatment programs as required by the program manual. Of the total 64,836 offender screenings performed, 23,029 (36 percent) were considered repeat offenders with two or more driving while intoxicated offenses. Our review identified 1,247 (5 percent) of these repeat offenders who were still assigned to a Level I program. According to the division's program manual, offenders with more than one conviction for driving while intoxicated are not eligible to attend an entry-level program.

Some offenders are not required to complete higher level programs if they live more than 30 miles from a provider offering such programs. According to the program manual, offenders do not have to attend recommended higher level programs if they live more than 60 miles from a Level II program provider, or 30 miles from a Level III program provider. Instead, they may attend a lower level program. The division does not track how often distance allowances are granted, or whether such allowances are granted to repeat offenders.

Offenders must complete questionnaires and a driver risk inventory during the screening process. These screening tools require offenders to provide information about previous treatment programs completed and previous alcohol or drug-related traffic offenses. Division of Alcohol and Drug Abuse personnel stated that federal guidelines prohibit giving offender management units access to the offenders' prior program history. As a result, the screeners cannot verify the information provided by the offenders.

Procedures need improvement

Division personnel need to ensure accurate and complete information is recorded in data systems, and implement several management reconciliations regarding this

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information. These changes are necessary to ensure offenders actually complete the assigned treatment program, the state screening fees are remitted to the state, and proper payments are made to providers. Information such as social security number, birth data, first name and middle initial, blood alcohol level, repeat offender status, and program level assigned is often not entered in the division's data systems.

Fees not remitted timely

Offender management units do not always remit the state's portion of screening fees timely. Total fees received for fiscal year 2000 and 2001 were \$1,687,868 and \$1,655,748, respectively. Our fiscal year review showed the offender management units made late payments for approximately 48 percent of payments in 2000 and 43 percent in 2001. Some payments were significantly late. For example, a review of 1,368 January 2001 screenings with remittances due by February 15, 2001, showed 1,004 screenings (74 percent) paid after that date, with 329 of these screenings (24 percent) remaining delinquent as of March 1, 2001, and some not paid until May 2001.

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Missouri State Auditor

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and
Members of the General Assembly
and
Dorn Schuffman, Director
Department of Mental Health
and
Michael Couty, Director
Division of Alcohol and Drug Abuse
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The State Auditor's Office audited the Division of Alcohol and Drug Abuse's (division) Substance Abuse Traffic Offenders Program. The objectives of this audit were to determine whether offenders paid appropriate fees, attended and completed appropriate programs, and whether division officials paid appropriate amounts to service providers and provided proper oversight to the program.

We concluded that division personnel could improve monitoring of placement decisions to ensure offenders receive appropriate education and treatment. Additionally, improvement was needed in managing data collected to ensure state fees were paid and proper payments were made to service providers.

The audit was conducted in accordance with applicable standards contained in *Government Auditing Standards*, issued by the Comptroller General of the United States, and included such tests of the procedures and records as were considered appropriate under the circumstances.

Claire McCaskill
State Auditor

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RESULTS AND RECOMMENDATIONS

1. Better Procedures Are Needed to Ensure Offenders Are Placed in the Proper Treatment Programs

Some repeat and serious offenders are not placed in higher level treatment programs. According to division employees, lower level placement usually is allowed when offenders live further than 30 or 60 miles away from providers offering higher level treatment programs. In addition, procedures may not identify offenders as repeat offenders. As a result, individuals may not receive the proper rehabilitation education and treatment programs. Program officials have recently de-emphasized the mileage criteria as a reason for assigning a lower level of treatment. More stringent regulations, increased monitoring of placement decisions, and data system improvements would result in more offenders receiving the appropriate treatment.

Program procedures

The program is a statewide system of comprehensive, accessible, community-based education and treatment options for individuals arrested in Missouri on alcohol and drug-related offenses. The enabling legislation for the program is contained in Chapters 302 and 577, RSMo 2000, and became effective on July 1, 1994. This law requires suspension of an offender's driver's license until he/she successfully completes an acceptable substance abuse traffic offender program. Depending on severity and frequency of offense, offenders can be ordered to different levels of treatment as shown in Table 1.1.

Table 1.1: Treatment Level for Offenders

Level	Programs	Program Description
I	Offender Education/ Adolescent Diversion Education Programs	10-hour education courses designed to help first-time offenders understand the choices they made leading to their intoxication, drug abuse and arrest.
II	Weekend Intervention	A weekend (48 continuous hours) of intensive education and counseling intervention methods.
III	Clinical Intervention/ Youth Clinical Intervention Program	Intensive outpatient counseling for 3 to 6 weeks based on the needs of the persistent or "high-risk" offender (minimum 50 hours) / Treatment for youth under the age of 21, consisting of intensive outpatient counseling based on the needs of the youthful offender. Each offender will participate in 25 total hours of treatment.
IV	Residential, Private, Hospitalization and State Funded Treatment Programs	State funded programs providing up to 30 days of traditional residential treatment for persons with alcoholism or drug dependency. Other inpatient and outpatient programs ranging from 50 to 200 hours for serious repeat offenders. Level IV treatment is recommended for offenders with four or more convictions and some high risk offenders identified in evaluation assessments.

Source: The Safe and Sober Manual published by the Division of Alcohol and Drug Abuse

Offenders are ordered to report to 1 of 72 offender management units (facilities certified by the Department of Mental Health) for an assessment and evaluation considering (1) a score on a driver risk inventory; (2) blood alcohol content level at arrest; (3) family background and family history of alcohol or drug abuse; and (4) appearance, previous arrests, and other factors. These assessments are made by professionals familiar with alcohol and drug abuse. At the conclusion of the screening process, the offender receives a list of certified providers with the recommended treatment program. Offenders are notified they must be enrolled in the assigned education or treatment program within 6 months of the initial screening. Upon completion of the treatment program, offender management unit personnel notify Department of Revenue officials to restore the offender's driving privileges.

The division has implemented various methods designed to ensure offender screenings and subsequent program assignments are made consistently and appropriately. These methods include using a uniform screening instrument, preparing a screening and referral manual for professionals authorized to screen, and biennially certifying and monitoring the offender management units. During fiscal years 2000 and 2001, screeners performed 64,836 offender screenings, and offenders completed 55,635 treatment programs.

(See Appendix II, page 16, for additional background information)

Repeat offenders are not advancing to higher level treatment programs as required

Some repeat offenders do not advance to higher level treatment programs as required by the program manual. Of the total 64,836 offender screenings performed, 23,029 (36 percent) were considered repeat offenders with two or more driving while intoxicated offenses. Our review identified 1,247 (5 percent) of these repeat offenders who were still assigned to a Level I program. According to the division's program manual, offenders with more than one conviction for driving while intoxicated are not eligible to attend an entry-level program. Specific examples of repeat offenders inappropriately assigned to a lower program level included:

Repeat offenders
were assigned to
the entry level
program

- Four offenders had four convictions each for driving while intoxicated, but were assigned to complete a Level I program.
- One offender with five convictions completed two Level I programs in 1999, a Level III program in 2000, and two Level I programs in 2000 and 2001 subsequent to the Level III program.
- One offender with four convictions completed two Level I programs in December 1999 and July 2000, completed a Level III program in March 2001, but then completed another Level I program in September 2001.
- One offender completed three Level I programs in less than 1 year.

In addition, we reviewed 54 repeat offenders who were assigned to a Level II or higher program, and noted that 21 (39 percent) did not advance to a higher level program as required by the program manual.

Repeat offenders often do not complete higher level treatment programs when recommended by the driver risk inventory. The driver risk inventory is a 140-item, self-administered offender screening assessment, that is particularly useful in identifying and evaluating offenders who do not effectively cope with stress. This instrument takes about 25 minutes to complete and recommends the appropriate program treatment level. Table 1.2 shows 4,139 of the 23,029 repeat offender screenings resulted in a different treatment level than recommended.

Table 1.2: Repeat Offender Treatment Activity

Recommended Program Level	Program Level Attended	Number of Offenders
IV	I, II, or III	14
III	I or II	3,269
II	I	<u>856</u>
Total		<u>4,139</u>

Source: Auditor's analysis of treatment levels for repeat offenders

Program officials stated that repeat offenders could be assigned to lower level programs when their circumstances are evaluated. Some could be assigned to a specific program by court order and others could have personal, work, or travel circumstances that could prevent longer term treatment assignments

Offenders avoided assignment to higher level programs

Some offenders are not required to complete higher level programs if they live more than 30 miles from a provider offering such programs. According to the program manual, offenders do not have to attend recommended higher level programs if they live more than 60 miles from a Level II program provider, or 30 miles from a Level III program provider. Instead they may attend a lower level program. The division does not track how often distance allowances are granted, or whether such allowances are granted to repeat offenders. Program officials stated that while mileage is still a consideration in any given case, there are no longer a set number of miles used as criteria. They referred to circumstances where a Level III type program is not available in the offender's community.

During fiscal years 2000 and 2001, our review noted 1,021 offenders attended a Level I program despite having a blood alcohol content greater than .18. According to the program manual, these offenders should not be assigned to the entry-level program.

Repeat offenders may not be identified during the screening process

Offenders must complete questionnaires and a driver risk inventory during the screening process. These screening tools require offenders to provide information about previous treatment programs completed and previous alcohol or drug-related traffic offenses. Offender management units employ professionals who rely on the screening information, the offender's personal interview, and the Department of Revenue's driving records to make the program assessments. However, offender management unit and division personnel stated the driving offense records may not be available during the screening, and not used when assigning the program level.

System
improvements are
needed

Division personnel stated that federal guidelines prohibit giving offender management units access to the offenders' prior program history. As a result, the screeners cannot verify the information provided by the offenders. For example, an offender could tell the screener he had no prior offenses when in fact he did. In addition, because the program does not assign an identifying number to offenders, the system cannot detect and prevent screeners from assigning program levels which violate program requirements. As a result, repeat offenders and offenders with high blood alcohol content levels are not prevented from being assigned to an entry level program. Because of these system deficiencies, division personnel cannot ensure the proper program treatment levels are assigned to offenders.

Some offenders may "shop" to be assigned to lower program treatment levels

Program completion information for fiscal years 2000 and 2001 showed 483 offenders were screened twice within 6 months. Of these offenders, 192 paid the state screening fee twice and did not designate the second screening as a second opinion. Offenders have the right to seek a second opinion and are not required to pay the state portion of the screening fee. These offenders; however, did not designate the screening as a second opinion and paid the state screening fee again. This scenario (not designating a second opinion was being sought and paying the state screening fee again) raises the possibility that the offender "shopped" for a lower level program assignment. We reviewed 50 of the 192 instances, and noted that 31 (62 percent) received a lower treatment level assignment on the second screening. Table 1.3 identifies examples where offenders went to more than one screener and obtained a different treatment program.

Table 1.3: Offender Screening Activities

Offender Number	Date of Screening		Screening Recommendation	
	First	Second	First	Second
1	August 2000	September 2000	Level III	Level I
2	February 2001	February 2001	Level III	Level II
3	October 2000	October 2000	Level II	Level I
4	January 2001	February 2001	Level III	Level I
5	September 2000	November 2000	Level III	Level I

Source: Auditor's analysis of offender screenings within six months of each screening date

Division internal review staff include the same type analysis of offender activities when targeting samples for their case reviews.

Conclusion

Division personnel need to adopt more stringent regulations, increase monitoring activities of placement decisions, and improve system capabilities to ensure offenders receive the appropriate education and treatment. While travel distances to treatment providers can present a hardship to offenders, this concern should be secondary to ensuring offenders attend the most appropriate treatment programs. Repeat offenders and offenders with a high blood alcohol content risk factor who do not receive the appropriate treatment programs are less likely to be properly rehabilitated.

Recommendations

We recommend the Director, Department of Mental Health:

- 1.1 Eliminate provisions allowing repeat and serious offenders assignment to lower level treatment programs due to the long driving distances to higher level treatment program.
- 1.2 Improve data system capabilities to ensure repeat offenders are properly identified during the screening process.
- 1.3 Increase the monitoring activities over instances where second screenings resulted in lower level treatment program assignments.

Department of Mental Health Responses

- 1.1 *We concur with this recommendation. Administrative rules have already been revised which became effective on October 1, 2001, which removed the distance criteria that may have reduced some placement recommendations. However, there may still be some situations in which there may not be higher levels of service available due to the remoteness of various areas. If no such services are available, individuals may need to complete the next lower service level that is reasonably available.*

Additional findings of the performance audit identified where repeat offenders may not have advanced to higher levels of treatment programs. While the audit gave specific instances of this finding, it was unable to obtain all of the information necessary in making this determination. There are other factors that could influence the placement of an individual into a program level, one such additional factor being a court order or a judicial review. SATOP providers will cite their findings for placement but state that the final recommendation is being made as a result of a court order.

- 1.2 *We concur with the recommendation. Findings for this performance audit were derived from a data system that is no longer in use.*

The Department of Mental Health, Division of Alcohol and Drug Abuse recognized some weakness of the previous data system and designed a new electronic system which was implemented April 1, 2002. The new SATOP Database Application has many features which will assist in identifying individuals who may have received some type of services from the Department.

However, the Department, and its certified providers, must operate within existing federal confidentiality regulations and are thereby restricted from disclosing specific types of services without a duly authorized release of information form signed by the individual. Information reported by the individual, information available on the Department of Revenue driving record, as well as information that can be shared in the SATOP Database Application must still be utilized by the providers in making appropriate program recommendations.

- 1.3 *We partially concur with the recommendation. Citing in the performance audit indicated where some clients had at least two screenings within six months where the second screening recommended a lower level than the first screening. A review of the sample found that two of the five individuals cited in the audit had an incorrect number of DWI offenses indicated on the assignment form that could not be corroborated by the Department of Revenue driving record. This change in DWI offenses could have been one of the contributing factors in the lower program recommendation.*

Another possibility for the different program recommendation could have been that the second screening was more accurate than the first recommendation. This could only be determined by reviewing the clinical documentation of the individual's record, which was not available for the performance audit.

Division staff routinely reviews all factors for determining the program recommendations individuals receive. The information reviewed includes the number of offenses as reported on the Department of Revenue driving record, the blood alcohol content at the time of the offense, the report of the Driver's Risk Inventory (DRI-II), and a summarization of the Qualified Substance Abuse Professional's interview with the individual where they review the pertinent information. If the documentation provided by the Qualified Substance Abuse Professional cannot support the recommendation, then appropriate action is taken by Division staff. Such actions can include additional technical assistance related to the screening of clients, the agency or individual being placed on a conditional certification status, or the revocation of certification. During the course of the performance audit, information was available which indicated that such actions have been initiated by Division staff.

Current monitoring activities include certification site surveys (generally conducted once every two years), compliance audits (conducted yearly), and monthly review of agency activities. The implementation of the new SATOP Database Application provides opportunities for Division staff to review, in a timelier manner, the screenings and recommendations made by agencies which allows for quicker response by Division staff to any problem areas that may be identified.

Auditor's Comment

The October 1, 2001, administrative rule cited by division officials may not ensure placement decisions are no longer reduced for distance considerations. The rule allows distance to be considered as a reasonable circumstance for not placing the offender in the recommended program. The rule does not define reasonable in terms of distance or travel time. Thus, there is no criteria for mileage under the new rule. Additionally, the rule has not been published in the revised program manual which serves as guidance for professional screeners who make treatment program assignments. Therefore, the only guidance that has been distributed to professional screeners is the guidance we cite in this report.

2. Data Collected and Reported in the Division's Data Systems Were Not Reliable

Division personnel need to ensure accurate and complete information is recorded in data systems, and implement several management reconciliations regarding this information. These changes are necessary to ensure offenders actually complete the assigned treatment program, the state screening fees are remitted to the state, and proper payments are made to providers. The division recently recognized weaknesses in data systems and began implementing a new automated data system that has better case tracking capabilities. Our initial review indicates that it is an improvement and provides safeguards that were not present before. We noted areas within the new system where improvements are still needed.

Management information is not always complete or accurate

Information such as social security number, birth data, first name and middle initial, blood alcohol level, repeat offender status, and program level assigned is often not entered in the division's data systems. In addition, our review noted spelling errors in client names, incorrect social security numbers, incorrect blood alcohol levels, and an incorrect number of previous driving while intoxicated offenses. These errors occur because offender management units do not properly complete the forms, or information from the forms is not accurately entered in the data systems. Division personnel have not developed edit checks to ensure screening and program completion information is accurate after data entry.

Edit checks have
not been
developed

Table 2.1 shows the errors in the data systems for the 64,836 offender screenings and 55,635 offender program completions during fiscal years 2000 and 2001.

Table 2.1: Errors in Data System

Description of Error	Number of Occurrences	Offender Screening Data	Program Completion Data
Blank fee fields	2,042	X	
Blank program level field	917	X	X
Repeat offender not indicated	3,234	X	
Duplicate entries in data fields	160	X	X

Source: Auditor's analysis of data system entries

In April 2002, division personnel implemented an automated direct-entry data system that will alleviate some of these errors in the future.

Basic management reconciliations have not been performed

Division officials do not periodically compare various management information to ensure the program is properly managed. The following basic reconciliations have not been performed:

- Offender screening information is not reconciled to offender program completion information. This reconciliation is necessary to ensure the offender completed the program determined by the qualified professional during the client screening.
- Offender screening information is not reconciled to offender management unit fee remittance information. Division personnel do not reconcile screening information forms to monthly offender management unit remittance summary reports. These reconciliations are necessary to ensure the state has received all fees. We matched offender screenings to offender management unit remittances and found 3,867 screened offenders that potentially did not pay their screening fees. We selected 60 offenders for further review and noted 26 (43.3 percent) instances where the required fees had not been paid to the state. Division officials previously identified one agency failing to remit fees and initiated litigation to recover the fees. Twenty of the 26 exceptions we noted involve this agency. According to division personnel, this agency had not remitted over \$40,000 in fees between July 1, 1999 and July 31, 2001. This agency owes \$15,692, which is being repaid through future payment withholdings for contracted services performed. The results of our match also noted some screening agencies made duplicate payments to the state for the same offender screening. In fiscal year 2001, we noted 10 duplicate payments made by the same agency for the same offender screenings during December 2000. Division personnel were unaware of these duplicate payments but later confirmed this information through contact with the applicable agencies.
- Offender program completion information is not reconciled to amounts the division pays to program providers. This reconciliation is necessary to ensure the division pays only for services provided and pays the appropriate amount for the program.
- Offender screening, program completion, and Department of Revenue notification forms are not pre-numbered to account for all applicable forms, which makes these forms irreconcilable.

Some fees have not been paid to the state

State screening fees are not remitted timely

Offender management units do not always remit the state's portion of screening fees timely. The program manual requires offender management units to submit monthly reports along with the fees collected to the state by the 15th day of the following month. Total fees received for fiscal year 2000 and 2001 were \$1,687,868 and \$1,655,748, respectively. Our fiscal year review showed the offender management units made late payments for approximately 48 percent of payments in 2000 and 43 percent in 2001. Some payments were significantly late. For example, a review of 1,368 January 2001 screenings with remittances due by February 15, 2001, showed 1,004 screenings (74 percent) paid after that date, with 329 of these screenings (24 percent) remaining delinquent as of March 1, 2001, and some not paid until May 2001.

Penalty provisions are needed

New computer data system is implemented

A new computer data system was implemented in April 2002. The new system is totally electronic and does not use manual forms. The system is still being updated and some offender management units have not converted to the new system. This system requires information in certain fields to be entered into the data system. This data entry should help ensure the accuracy and completeness of most information recorded. Our review of system capabilities noted the following:

- The new data system provides for a computer-generated reference number which is a unique number and cannot be duplicated. Therefore, the control of having pre-numbered forms and periodically accounting for the numerical sequence of these forms has been implemented.
- Each new offender is given a state identification number along with a local chart number. An offender that has been in the department's mental health system before will be identified through these numbers and the information can be used for additional screening purposes. This procedure should aid in identifying previous offenders.

Even with the new system there are management concerns that still need to be addressed:

- Edit checks to ensure accurate information is entered for areas such as the number of prior offenses and blood alcohol content level have not been designed.
- While the new data system will automatically generate a monthly listing of fees owed to the state, division personnel will still need to reconcile monthly totals to fees actually collected. Division personnel will also need to reconcile screening assignments to the programs billed by service providers to ensure payments are for the program assigned and actually attended.
- The new system does not prevent offender management unit screeners from inappropriately assigning repeat and serious offenders to lower level treatment programs.

Conclusion

Division personnel need to establish appropriate edit checks to ensure the integrity of information entered in data systems. The division also needs to implement various management reconciliations to ensure appropriate programs were completed, state screening fees were remitted, and proper payments were made to service providers. Penalty provisions need to be adopted to ensure state screening fees are remitted in a timely manner. The new automated system has not been on-line long enough to determine its full effect on the problems noted in the audit. However, based on an initial review, the system is an improvement.

Recommendations

We recommend the Director, Department of Mental Health:

- 2.1 Install edit checks in the data system to ensure information recorded in the database is accurate and complete.
- 2.2 Reconcile fees owed to fees collected monthly.
- 2.3 Reconcile other information reported to ensure the program is managed correctly.
- 2.4 Develop procedures to penalize late fee payers.

Department of Mental Health Responses

- 2.1 *We concur with the recommendation. A new database application was implemented statewide on April 1, 2002. Several features of this new application have the edit checks identified by the performance audit which would require information to be provided.*

Findings reported in the performance audit indicated that data was incomplete or missing. Rates identified ranged from 4.98% to 0.13%. While these are low rates for data errors, the new application will ensure that the data is accurate and complete thereby lowering the data errors encountered.
- 2.2 *We concur with the recommendation. The implementation of the SATOP Database Application will allow for the reconciliation of supplemental fees owed to supplemental fees remitted. Discussions are already in place with the Department's Office of Information Services to enhance the application allowing for this function to be completed.*
- 2.3 *We disagree with this recommendation. Data from the database system is reviewed (reconciled) by Division staff in order to identify where agencies may be deviating from standards. When anomalies are found, the agency may be contacted to provide additional information or Division staff may visit the site to review the files. Data from the database is also used to determine the types of files reviewed by Division staff while conducting compliance audits or certification site surveys. Current administrative rules and policies identify the actions which may be taken whenever there are deviations from standards. As identified earlier, these actions can include conditional certification, revocation of certification, or other administrative sanctions. During the course of the performance audit, information was available which indicated that such actions have been initiated by Division staff.*
- 2.4 *We partially concur with this recommendation. The remittance of supplemental fees in a timely manner is one of the requirements of the SATOP administrative rules. Policies already exist which allow for agencies to receive penalties for late remittance of the supplemental fee. These actions include being placed on conditional certification status,*

revocation of certification or other administrative sanctions. During the course of the performance audit, information was available which indicated that such actions have been initiated by Division staff. Current statutes do not allow for the assessment of any financial penalty for the late remittance of fees. The Division will study the feasibility of developing legislation to address this issue.

OBJECTIVES, SCOPE AND METHODOLOGY

Objectives

The Department of Mental Health, Division of Alcohol and Drug Abuse is responsible for the operation and management of the Substance Abuse Traffic Offenders Program. The objectives of the audit were to determine whether:

- (1) Offenders pay and screening agencies remit the appropriate fees to the state as required.
- (2) Offenders complete the program determined by the screening assessment.
- (3) Offenders receive the appropriate treatment level, including whether repeat offenders are moved to higher treatment levels.
- (4) The division pays the proper amount to service providers.
- (5) The division ensures service providers have accurately completed standard means tests.
- (6) The division accurately captures information in databases and effectively uses this information to manage the program.
- (7) The division adequately performs billing reviews and on-site certification reviews.

Scope and Methodology

Audit fieldwork began in November 2001 and continued through June 2002. Audit staff:

- Reviewed applicable state statutes and regulations, and division policies and procedures.
- Interviewed knowledgeable personnel and reviewed the division's processes and controls for screening offenders, receipting state screening fees, paying service providers, and performing certification reviews of offender management units.
- Performed data analysis and related testing procedures on program information extracted from various division data systems for fiscal years 2000 and 2001. Although original data could not be validated (see scope impairment below), we were able to determine that data were incomplete and inaccurate.
- Reviewed offender management unit certification reviews and provider reviews performed by division staff.

APPENDIX I

The scope was impaired due to a lack of records which resulted in the inability to complete either fully or partially the objectives of the audit. We cannot attest to the impact the records we were not able to obtain would have had on this audit.

PROGRAM MISSION AND ADMINISTRATION

The Department of Mental Health, Division of Alcohol and Drug Abuse administers the Substance Abuse Traffic Offenders Program that provides services to individuals who have had an alcohol or drug related traffic offense. The program serves more than 32,000 offenders annually who are referred as a result of an administrative suspension or revocation of their driver's licenses, court order, condition of probation, or plea bargain. When a person's driver's license is suspended or revoked due to an alcohol related offense, the program is, by law, a required element in driver's license reinstatement by the Department of Revenue. All offenders enter the system via an offender management unit. Offenders receive a screening assessment which includes a review of their driving record and breath alcohol content at the time of their arrest, a computer-interpreted assessment and an interview with a qualified substance abuse professional. Based upon the information gathered during the screening, an appropriate referral is made to one of several types of programs.

The program's mission is to inform and educate offenders as to the hazards and consequences of impaired driving, promote safe and responsible decision making regarding driving, motivate for personal change and growth, and contribute to public health and safety. The program provides a range of educational and rehabilitative options, designed to be commensurate with the level of the offender's substance abuse/dependency. The program has several different levels of participation based on factors relied upon by qualified professionals at the time of the screening. These factors include a score on a driver risk inventory, blood alcohol content level at the time of the arrest, family background and family history of alcohol or drug abuse, appearance, previous arrests, and others.

The offender pays \$125 for the screening to the offender management unit, which retains \$66 and remits the remaining \$59 to the state's Mental Health Earnings Fund. There are about 200 locations statewide where offenders can be screened. At the conclusion of the screening process, the offender is given a list of certified providers where the recommended treatment program is available. The offender is notified that he/she must be enrolled in the assigned education or treatment program within 6 months of the initial screening or another screening must be performed. Offenders are also informed of their right to a second opinion at the time of the initial screening. However, once the offender has begun the intervention/treatment program recommended by the original offender management unit, the right to a second opinion is forfeited.

Offender management unit personnel send copies of the screening forms to the division. After the client completes the assigned program, the service provider sends a copy of the program completion form to the offender management unit that performed the screening. Unit personnel submit a notification form to the Department of Revenue to reinstate the offender's driver's license. Unit personnel also forward copies of the program completion form to the division. Division staff enter information from these forms in program databases and then destroy the copies of the forms.

APPENDIX II

Division staff perform certification reviews on all offender management units every 2 years for state recertification. These reviews include reviewing selected client files for appropriate forms, adequate documentation, reasonableness of treatment program level, and payment of fees to the state. The reviews also include a review of the facilities, curriculum, personnel files, policy and procedure manuals, and attendance records. Division personnel prepare a written recertification report that is signed by the division director. Units with severe problems are more closely scrutinized, and recommendations are tracked to ensure implementation. Recommendations are made and severe violations could result in an offender management unit losing its state certification.